

PTO/SB/01 (08-03)  
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<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	
Application Number	
Filing Date <b>MARCH 31, 2004</b>	
First Named Inventor <b>Arnold Take moto</b>	
Title <b>Breast Health Preparation</b>	
Art Unit	
Examiner Name	
Attorney/Agent Number <b>ATAKEM-004-USA</b>	

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Name	Registration Number
<i>Gregory Shen</i>	47940

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Applicant/Inventor.

Assignee or record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee or Record

Name	<i>Arnold Take moto</i>
Signature	<i>Arnold Take moto</i>
Date	<i>3/31/2004</i>
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit one signature if more than one signature is required, see below.

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